

AMENDMENTS TO THE CLAIMS

1. (Original) A method for treating impaired filtration or excretion of a solute in the kidney, comprising administering to a patient an effective amount of a vascular endothelial growth factor (VEGF), wherein filtration or excretion of the solute is improved as compared to the pre-treatment condition of the patient.
2. (Currently amended) The method of claim 1, wherein said VEGF is selected from the group consisting of native ~~hVEGF121~~ hVEGF₁₂₁ (FIG. 6, SEQ ID NO: 1), native ~~hVEGF145~~ hVEGF₁₄₅ (FIG. 7, SEQ ID NO: 2), native ~~hVEGF165~~ hVEGF₁₆₅ (FIG. 8, SEQ ID NO: 3), native ~~hVEGF189~~ hVEGF₁₈₉ (FIG. 9, SEQ ID NO: 4), and native ~~hVEGF206~~ hVEGF₂₀₆ (FIG. 10, SEQ ID NO: 5).
3. (Original) The method of claim 1, wherein said VEGF lacks the ability to bind heparin.
4. (Currently amended) The method of claim 1, wherein said VEGF is a native ~~hVEGF121~~ hVEGF₁₂₁ (FIG. 6, SEQ ID NO: 1).
5. (Original) The method of claim 1, wherein said VEGF comprises a heparin-binding domain modified to render it incapable of binding heparin.
6. (Original) The method of claim 1, wherein said VEGF comprises an amino acid alteration within its heparin-binding domain.
7. (Original) The method of claim 1 comprising the administration of two or more VEGFs.

8. (Original) The method of claim 1, wherein said VEGF is coadministered with another angiogenic factor.

9. (Original) The method of claim 1, wherein the solute is sodium chloride.

10. (Original) The method of claim 1, wherein the impaired filtration or excretion of solutes comprises an aspect of hypertension.